

MEDICAL, PHOTO AND VIDEO PERMISSION AND RELEASE FORM

Trinity Wellsprings Church, Satellite Beach, Florida

Rev. 2017

This form is for use on all church sponsored activities for one year. Today's date is: _____. Please attach a photocopy of your insurance card.

Participant's Full Name _____

Date of Birth: _____ SS# _____

Parent(s) or
Guardian(s) _____

Address: _____ City: _____

Zip: _____ Phone # _____ Work # _____

Cell Phone: _____

Family Physician: _____ Phone: _____

Address: _____ City: _____

Is this child covered by any medical or hospitalization insurance? _____

Name of Insurance Co: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Policy No.: _____

Name of Policy Holder: _____

Immunizations (Give Dates): _____ Tetanus _____ Polio Booster _____ Measles _____ Mumps

PAST MEDICAL HISTORY

(Check, giving appropriate information)

____ Asthma ____ Sinusitis ____ Bronchitis ____ Kidney Troubles ____ Heart Trouble ____ Diabetes ____ Dizziness

Allergies

Food: _____ Penicillin or other drug (name): _____

Insect Stings/Bites: _____ Poison sumac, oak, or ivy: _____

Other: _____

Previous operations or serious illnesses: _____

Any medications you are taking (list): _____

Special Diet: (Name) _____

Childhood Diseases: ____ Chickenpox ____ Measles ____ Mumps ____ Whooping Cough ____ Other

BE SURE TO SIGN THE SECOND PAGE AND HAVE THE FORM NOTARIZED

THINGS WE HAVE AN UNDERSTANDING ABOUT

Guidelines of Conduct

For your information we expect each student to conform to these Guidelines of Conduct:

- Possession or use of alcohol, drugs or tobacco, weapons, fireworks, explosives and lighters is prohibited
- Students may not drive without prior approval
- Students are not allowed to go anywhere alone and MUST BE IN GROUPS OF AT LEAST THREE at all times.
- No immodest clothing (No cheekinis, no spaghetti straps, shorts must be finger length on thigh, no midriffs/crop tops, boys must wear t-shirts at all times, students must be fully clothed on way to showers)
- Boys may not enter the girls sleeping quarters and girls may not enter the boys sleeping quarters
- Participation in the group and event schedule is expected
- Respect property—If damage occurs, participant is liable for repair or replacement
- Respect staff, adult leaders and one another

We take the above guidelines seriously and will send students home if they do not comply with these simple expectations for the safety and well being of all. Students who fail to comply with these expectations may be sent home at their parents' expense.

I, the student, have read the Guidelines of Conduct. I agree to abide by the Guidelines of Conduct.

Student signature: _____ Date: _____

I (we) the parent(s)/guardian, have read the guidelines of conduct. I (we) realize that if our student(s) do not comply with the Guidelines of Conduct that they may be sent home at my(our) expense.

Parent(s)/guardian signature: _____ Date: _____
_____ Date: _____

PERMISSION FOR TREATMENT, PHOTO/VIDEO NOTICE, RELEASE AND INDEMNITY

My permission is granted for the Trinity Wellsprings Church leaders, TWC staff or adult present or in charge of First Aid, to obtain necessary medical attention in case of sickness or injury.

Also, I understand that as a participant, I or my student may be photographed or videotaped during normal TPC activities and these photos/videos may be used in promotional materials or on our Web Page. I, the signed, do hereby verify that the information on the reverse page is correct.

Please complete and sign below (students under 18 years of age require parent/custodial signature)

Participant's Signature: _____ Date: _____

Parent/Custodial Signature: _____ Phone _____ Date: _____

Notary Public

State of Florida: County of Brevard

The foregoing instrument was acknowledged this _____ day of _____, 20____,

by _____, who personally appeared before me and acknowledged that he/she signed the instrument voluntarily for the purpose expressed in it. My commission expires _____.

Signed: _____

Personally Known

Produced Identification

Type of Identification: _____